Mental Health Medication Advisory Committee Meeting Meeting Minutes, Open Session August 14, 2018 at 2:00 – 4:30 p.m.

MHMAC

Open Session DXC Technology Capital Room 6511 Forbes Ave. Topeka, KS 6619

Committee Members Present:

DeAnn Jenkins, MD (Chair)
Bradley Grinage, MD
Rebecca Klingler, MD
Charles Millhuff, DO
Taylor Porter, MD
Vishal Adma, MD, MS, CMQ, CPE
Karen Moeller, PharmD, BCPP
Nicole Ellermeier, PharmD
Holly Cobb, APRN

KDHE/DHCF/Contractor Staff Present:

Greg Lakin, DO, Medicaid Medical Director, Chief Medical Officer, KDHE Annette Grant, RPh,
Roxanne Chadwell, PharmD, CSP
Margaret O'Donnell, Transcriptionist

MCO Representatives Present:

Jennifer Murff, RPh – United Healthcare Lisa Todd, RPh, BBA – Amerigroup Angie Zhou, PharmD – Sunflower

DXC/HID Staff Present:

Karen Kluczykowski, RPh Kathy Kaesewurm, RN, BSN

Representatives:

Jennifer Erskin, Alyce Remington, J. McDaniels; James Lockard; Kevin Schmidt, Dan Maskil, Ross Merritt, Cerner; Roy Lindfield, Sunovion; Sharon Cain, Mark Maas, KUMC; Jody Legg, Alkermes; Jordan Marquess, KDHE.

*Illegible names on signin sheet were not included.

	DISCUSSION
I. Call to Order	Call to Order: Dr. Jenkins called the meeting to order at 2:05 p.m. Ms. Grant introduced new transcriptionist,
A. Introduction	Margaret O'Donnell.
B. Announcements	Announcements: Ms. Grant noted that the Conflict of Interest Disclosure form was added to the Board's packet.
II. Old Business	Committee Discussion:
A. Review and approval of	On page 4, under Clinical Public Comment, change KU to University of Kansas School of Medicine and DCF
May8, 2018 Meeting	to Department of Children and Families.
Minutes	On page 3, under Background, change Discmel to Discmelt.
	Decision and/or Action:
	Dr. Adma moved to approve the minutes as amended.
	Dr. Porter seconded the motion.
	The motion carried unanimously.
B. Presentation from Dr.	Clinical Public Comment:
Sharon Cain – Foster Care	No requests were received.
Psychotropic Workgroup	
Member.	Background:
	Workgroup's attempt to decrease over utilization of psychotropic medications in children in foster care in
	Kansas. Proposing working co-jointly with MHMAC in having the medication parameters/guidelines used as
	educational purposes for providers.
	Committee Discussion:
	There was discussion about having consistency between these proposed guidelines and the PAs and the need for
	ensuring an annual review and update of the information.
	Decision and/or Action:
	Dr. Ellermeier made the motion to do further research to potentially have this as a tool that's available.
	Dr. Porter seconded the motion.
	The motion carried unanimously.

III. New Business	Clinical Public Comment:
A. Prior Authorization	No requests were received.
Criteria	
1. Benzodiazepine	Background:
Medications – Safe Use	Discussed during the July DUR meeting and brought back for additional recommendations.
for All Ages	
	Committee Discussion:
	Based upon previous DUR Board discussion, Ms. Grant proposed having more definitive language telling the patient they are at increased risk of respiratory depression if on an opioid and the benzodiazepine being requested exceeds dosing limitations. The Criteria was updated to include the language, "and consideration of a lower benzodiazepine and/or opioid dose along with consultation with opioid prescriber is recommended" in the sub bullet point under dosing limits. Dr. Ellermeier made a motion to accept the changes.
	Decision and/or Action:
	Dr. Moeller moved to approve as amended.
	Dr. Grinage seconded the motion.
	The motion carried unanimously.
III. New Business	Clinical Public Comment:
A. Prior Authorization	No requests were received.
Criteria	
2. Antipsychotic	Background:
Medications – Safe Use for All Ages	Brought back for additional recommendations for the long-term care setting section and the addition of Aripiprazole lauroxil (Aristada Initio TM) and Risperidone (Perseris TM).
	Committee Discussion: Based upon previous DUR Board discussion, Ms. Grant proposed striking the word "severe" in second bullet point under patients over 65 in LTC, non-dual eligibility group and considering criteria for patients over 65 outside of the LTC setting. Agreed upon language change: "when symptoms are severe or dangerous to self or others" changed to "when symptoms present a danger to self or others". The Committee requested data on similar patients not in the LTC setting and to bring this back as a separate agenda item.

	Decision and/or Action:
	Dr. Ellermeier moved to approve as amended.
	Dr. Moeller seconded the motion.
	The motion carried unanimously.
III. New Business	Clinical Public Comment:
A. Prior Authorization	No requests were received.
Criteria	
3. Antidepressant	Background:
Medications – Safe Use	Clarification of previously-approved criteria for multiple concurrent use of Mirtazapine and Trazodone used as
for All Ages	sleep aids due to operational challenges.
	Committee Discussion:
	The criteria were discussed and the committee voted to exclude Mirtazapine and Trazodone and to bring this
	PA back in November with related data.
	Decision and/or Action:
	Dr. Porter moved to take Mirtazapine and Trazodone off the list to further study the actual numbers.
	Dr. Adma seconded the motion.
	The motion carried unanimously.
III. New Business	Clinical Public Comment:
A. Prior Authorization	No requests were received.
Criteria	
4. ADHD Medications –	Background:
Safe Use for All Ages	Addition of two new drugs, Evekeo® and Relexxii™.
	Committee Discussion:
	A third newly released drug, Jornay PM TM , was added during the meeting.

	Decision and/or Action: Dr. Adma moved to approve as amended. Dr. Ellermeier seconded the motion. The motion carried unanimously.
III. New Business B. Review of Mental Health Medication Prior Authorization Forms/Process	Background: A "How-To" presentation on using one of the Mental Health Class (Antipsychotic) PA forms was given by Dr. Chadwell. The four new Class PA forms will replace the current 11 PA forms, starting September 15 th .
General Discussion	Ms. Grant spoke about data results comparing a pre-antipsychotic prior authorization requirements time period to recent data, showing an improvement (reduction) of children less than six years old on antipsychotics and an improvement (reduction) of children less than six years old on any mental health medication. The data also showed a decrease in the total number of children under six years old on an antipsychotic above the recommended maximum dose. In addition, metabolic testing increased dramatically for all patient age groups receiving an antipsychotic.
IV. Open Public Comment	Clinical Public Comment: None.
V. Adjourn	Committee Discussion: Dr. Moeller moved to adjourn. Dr. Ellermeier seconded the motion. Dr. Jenkins adjourned the August 14, 2018 MHMAC meeting at 4:20 p.m.

All approved PA Criteria are posted to the KDHE website:

http://www.kdheks.gov/hcf/pharmacy/pa criteria.htm